| | | Eller. | وستان ۱۱٬۰۰۰ | 1 Pe | רנינ | CPA | - | | | ょ | 270 | 13 |
|--------------------------|---|----------------------------|--------------------------------------|------------------|--------|------------|---------|------------|--------------------|---------|---------------|---|
| CLAIMS AS FILED - PART I | | | | | | | | SMALL E | יעדודע: יעדודע: | | OTUE | |
| (Calumn 1) (Calumn 2) | | | | | | | | TYPE (| | OR | SMALL | R THAN. |
| TOTAL CLAIMS | | | | | | | | RATE | FEE | 7 | RATE | FEE |
| FOR | | | CECUMBERT WELL MANAGE | | | вен супна | | BASICITE | € 370 00 | QB | BASIC FEC | 750.00 |
| TOTAL CHARGEABLE CLAIM: | | | 33 nuius 20 . | | | 13 | | X\$ 9 | | OR | X\$18= | 20 |
| MDEPENDENT CLAIMS | | | 6 minus 3 = " | | | 3 | | X42: | | QΒ | X84=3 | 37.5 |
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| • 11 | the difference | in column dis | ess than zero, enter "O" in column ? | | | | 16)174. | | 103 | t tener | | |
| • | ^ | LAIMS AS A | MEHDED | DAD. | T 11 | | | | |]; | 101/4 | 1436 |
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| ₹ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CL | | | | | | 1 | /\12- | | OR | 7,042 | - 100 - 100 |

* If the nitry in column 1 is less than the entry in column 2, write "0" in column 3

**If the "Highest Number Previously Paid For" (IN THIS SPACE is less than 20, enter "20."

**If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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Peters and Trademark Office, U.S. DEPARTMENT OF COMMERCE

OR

+280=

OR ADDIT. FEE

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